

REPORT OF THE CHAIRMAN OF THE TECHNICAL DEVELOPMENT BOARD TO THE GOVERNING COUNCIL, 1961-1962

SIX years have passed since the Technical Development Board was conceived at the Arden House Conference and soon thereafter created through action of the Governing Council and appointment by the Executive Board. During this six-year period, 41 members and Fellows of the Association have enjoyed the challenge and opportunity of membership on the board.

These individuals have become board members as a result of their additional duties arising from appointment as chairman of a Standing Committee on Evaluation and Standards, Professional Education, or Research Policy; as chairman of any one of the several Program Area Committees; or as one of the six members-at-large. This design structures the composition of the board to discharge its assignment to stimulate and coordinate the professional programs of APHA.

Persons appointed to the committees and to TDB have reacted admirably. They have spent many hours and days of professionally dedicated effort directed toward improvement of public health practice by various means, including the improvement of the circumstances or environment within which health departments function; methods for community assessment of problems and resources and subsequent community planning; the elucidation of the philosophical bases for action programs; the development of detailed technical methodology and concern with creation of a sound legal basis for the conduct of general and specific program responsibilities.

The board is continuously attempting, through the individual and group judgment of its members, to make a multitude of discriminating decisions so that suitable and usable tools may be forged and sound policy suggestions written for Governing Council consideration. Hopefully these are filled with telling phrases coined for use in the Association's attempts to influence public and legislative insight, opinions, and policies relating to public health.

The members of the board trust that tasks completed and under way are reasonably appropriate to the needs of community health agencies and workers in carrying out their own objectives and programs for the improvement of personal and public health.

Policy Proposals and Other Association Documents

At the 1961 Annual Meeting the Executive Board urged several detailed charges for the board: (1) draft proposed legislation on chronic disease; (2) develop standards for administration of medical care programs; (3) prepare program guides on medical care administration; (4) evaluate content, administration, and programs of the Community Health Services and Facilities Act. These charges were delegated to appropriate Program Area Committees and a progress report is made as a part of the summary of committee actions below. Policy proposals originated by components of the Technical Development Board and being put forward for consideration by the Governing

Council this year include: Rehabilitation—Everyone's Concern (attached), Emergency Community Health Services (attached), and a resolution on Health and Fitness of School-Age Children. By direction of the Executive Board, the proposed Dental Health Section policies were reviewed. The board joined in commendation of the Dental Health Section for preparation of this document and urges other Sections to prepare similar documents covering their areas of interest. It is further recommended that the document be adopted as an Association guide.

Several other documents are in preparation, especially as shown in the next section of this report under the Program Area Committees on Chronic Disease and Rehabilitation, Medical Care Administration, and Public Health Administration.

Program Area Committee on Accident Prevention

A statement was prepared and testimony on accident prevention made to a Congressional committee. Tentative plans have been formulated with industry representatives for a special project for development and distribution of health education materials on the prevention of accidental poisoning. A pamphlet on wringer washing machines, prepared by the committee, has been published by the Evanston Health Department and circulated nationally. The possibility of preparing abstracts on accident prevention for professional journals is being considered. Model ordinances relating to safety are being prepared.

Program Area Committee on Child Health

The series of publications on services for children are under constant review and revision and the committee is con-

sidering expansion of this series to include such subjects as prenatal care, services for older children and adolescents, day care, foster care, and institutional care. At the present time the committee is developing indexes of child health and child health services, statements in regard to child health legislative needs, and the role of maternal and child health in chronic disease and tuberculin testing in children. A timely statement on control of dangerous drugs has been approved by the Executive Board. Studies have been performed on maternal and child health personnel and a report is being made ready with the hope of publication.

Program Area Committee on Chronic Disease and Rehabilitation

A proposal and grant request has been prepared for joint action with the National Rehabilitation Association in sponsoring a national and several regional conferences on public health and rehabilitation. Invitees will include persons from these agencies plus representatives of other interested groups and agencies. A guide to periodic health appraisal of adults is in preparation as is a program guide on community services for persons over 65. A grant request to finance an Association alcoholism program was denied and this request is being rewritten for resubmission. The Task Force on Narcotic Addiction plans a position paper on narcotic addiction as a public health problem, contemplates a possible national conference on narcotic addiction, and has assisted the American Orthopsychiatric Association in preparation of a session at the Annual Meeting. The committee itself is also developing an interest in problems of rehabilitation of mentally ill, retarded, and delinquents. This committee is investigating the legislative needs in chronic illness on the basis of the Executive Board charge.

Program Area Committee on Control of Mental Disorders

On recommendation of the Technical Development Board the Executive Board altered the name of this committee to more correctly reflect its responsibility. Early planning has been done for preparation and publication of a guide to the organization and operation of community mental health services which would be a companion piece to "Mental Disorders: A Guide to Control Methods," submitted to certain sections with the October issue of the Journal.

Program Area Committee on Environmental Health

Revision of the Association's housing documents is being pushed. The development of a coordinating function for environmental health programs, materials, and standards is proposed similar to that performed by the Coordinating Committee on Laboratory Methods for laboratories. The committee voted to accomplish solid consolidation of subcommittees with similar ones of the Engineering and Sanitation Section.

Program Area Committee on Health Services in Disaster

Resolutions have been prepared and submitted to the Committee on Resolutions for consideration.

Program Area Committee on Medical Care Administration

A tentative draft statement on "Medical Care and the Health of the Nation" has been circulated to members of the Governing Council and Section Councils at the direction of the Executive Board with the invitation for critical review and comment to be returned to the chairman of the committee. The draft will be rewritten in the light of com-

ments received. Additional policy proposals are planned on Medical Care and the Health of the Aged as well as Medical Care and the Health of Children. A program guide with standards of quality has been drafted for use in organizing and administering medical care programs. The development of these standards and program guide is undertaken in response to the charge from the Executive Board noted above.

Program Area Committee on Public Health Administration

Evaluation of the content, administration, and program of the Community Health Services and Facilities Act has begun in response to a charge of the Executive Board. Next year the committee will submit through the Technical Development Board the new statements on services and responsibilities of local and state health departments for approval by the Governing Council as well as a revised "Follow-Up Standards for Tuberculosis Cases, Contacts, and Suspects: A Guide for Medical and Public Health Nursing." A document on health practice evaluation is under development and is approximately a year away. Under auspices of the committee a grant request has been prepared to finance preparation of a manual on public health law.

Program Area Committee on Radiological Health

There has been no meeting this year.

Concluding Statement

In addition to the ongoing tasks enumerated in the foregoing, the board has major interest in rejuvenation of a behavioral science program; meaningful coordination of Association committees with the work of the National Commission on Community Health Services; de-

velopment of a plan and policy for the Association in regard to its sponsorship or participation in significant confer-

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Report of the chairman of the Technical Development Board to the Governing Council at the Ninetieth Annual Meeting in Miami Beach, Fla., October 17, 1962.

ences; exploration of the role of health and demographic factors in relationship to economic status.

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Also: (1) the chairmen of the Committees on Evaluation and Standards, Professional Education, and Research Policy; (2) the chairmen of all nine Program Area Committees.

REHABILITATION—EVERYONE'S CONCERN

THE APHA is acutely concerned with the disparity between the high degree of rehabilitative skills that have been developed and the customary level of their application to persons in need of them. As a professional organization of health workers, we are concerned with the extension of scientific knowledge and its socially profitable utilization. Rehabilitation, which is everyone's concern, deserves our concentrated efforts as well as those of other major professional health groups.

By rehabilitation we refer to the process of increasing the disabled or dependent person's ability to clarify and achieve his own objectives, whether it be to some degree of self-care, "independent living," partial productivity, or full employment.

Satisfactory administrative approaches to rehabilitation must be found. Many hands must be involved; many are involved. They often grasp for the same service while larger areas go unattended. A common basis of understanding on how to apply the available scien-

tific knowledge: (1) At the place where people are, i.e., the local community; (2) in the form of early, personalized, and comprehensive service; (3) to release community resources now going to the unnecessarily dependent and disabled; (4) toward the maximum social independence that the rehabilitated person is capable of attaining whether it be to self-help, to lack of restriction, or to work.

APHA regards itself as only one of the many interested groups helping to define and develop the concepts of rehabilitation and how it can best be effected. It believes that the nation must have a philosophy about rehabilitation, one consonant with democratic beliefs about community self-determination, state and local responsibilities, and authority. The health and medical philosophy of rehabilitation is of special interest to APHA, but we appreciate that the health-oriented viewpoint must be brought in agreement with other viewpoints.

A national rehabilitation philosophy